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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	DP6760 US NA
	First Inventor	STEVEN WAYNE SMITH, ET AL.
	Title	PROCESS AND APPARATUS FOR IMPROVED CONDITIONING OF MELT-SPUN MATERIAL
	Express Mail Label No.	EK004594446US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages <u>23</u>] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C.113) [Total Sheets <u>2</u>]</p> <p>5. Oath or Declaration [Total Pages <u>1</u>] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 17 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p> <p>ACCOMPANYING APPLICATIONS PARTS</p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) Attorney</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(I). Applicant must attach form PTO/SB/35 or its equivalent</p> <p>17. <input type="checkbox"/> Other:</p>

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:


☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

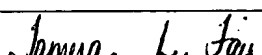
of prior application No: _____

Prior application information: Examiner _____

Group Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label					
 23906 PATENT TRADEMARK OFFICE					
or <input type="checkbox"/> Correspondence address below					
Name					
Address					
City		State		Zip Code	
Country		Telephone		Fax	

Name (Print/Type)	TAMERA L. FAIR	Registration No. (Attorney/Agent)	35,867
Signature		Date	MAY 15, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS: SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 1102

Complete if Known

Application Number	UNASSIGNED
Filing Date	HEREWITH
First Named Inventor	STEVEN WAYNE SMITH, ET AL.
Examiner Name	UNASSIGNED
Group / Art Unit	UNASSIGNED
Attorney Docket No.	DP6760 US NA

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:
- Deposit Account Number: **04-1928**
- Deposit Account Name: **E. I. du Pont de Nemours and Company**
- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☐ Applicant claims small entity status. See 37 CFR 1.27
2. ☐ Payment Enclosed:
- ☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	201	355	710	Utility filing fee	710
106	206	160	320	Design filing fee	
107	207	245	490	Plant filing fee	
108	208	355	710	Reissue filing fee	
114	214	75	150	Provisional filing fee	
SUBTOTAL (1)					(\$ 710)

2. EXTRA CLAIM FEES

Total Claims	24	-20	=	4	X	18	=	72
Independent Claims	7	-3	=	4	X	80	=	320
Multiple Dependent	0				X	270	=	0

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
103	203	9	18	Claims in excess of 20
102	202	40	80	Independent claims in excess of 3
104	204	135	270	Multiple dependent claim, if not paid
109	209	40	80	** Reissue independent claims over original patent
110	210	9	18	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 392)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	205	65	130	Surcharge - late filing fee or oath	
127	227	25	50	Surcharge - late provisional filing fee or cover sheet.	
139	139	130	130	Non-English specification	
147	147	2,520	2,520	For filing a request for reexamination	
112	112	920*	920*	Requesting publication of SIR prior to Examiner action	
113	113	1,840*	1,840*	Requesting publication of SIR after Examiner action	
115	215	55	110	Extension for reply within first month	
116	216	195	390	Extension for reply within second month	
117	217	445	890	Extension for reply within third month	
118	218	695	1,390	Extension for reply within fourth month	
128	228	945	1,890	Extension for reply within fifth month	
119	219	155	310	Notice of Appeal	
120	220	155	310	Filing a brief in support of an appeal	
121	221	135	270	Request for oral hearing	
138	138	1,510	1,510	Petition to institute a public use proceeding	
140	240	55	110	Petition to revive - unavoidable	
141	241	620	1,240	Petition to revive - unintentional	
142	242	620	1,240	Utility issue fee (or reissue)	
143	243	220	440	Design issue fee	
144	244	300	600	Plant issue fee	
122	122	130	130	Petitions to the Commissioner	
123	123	130	130	Petitions related to provisional applications	
126	126	180	180	Submission of Information Disclosure Stmt	
581	581	40	40	Recording each patent assignment per property (times number of properties)	
146	246	355	710	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	249	355	710	For each additional invention to be examined (37 CFR § 1.129(b))	
179	279	355	710	Request for Continued Examination (RCE)	
169	169	900	900	Request for expedited examination of a design application	
Other fee (specify) _____					
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3)					(\$ 0)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	TAMERA L. FAIR	Registration No. Attorney/Agent	35,867	Telephone	(302) 892-7948
Signature	<i>Tamera L. Fair</i>			Date	MAY 15, 2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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